



DEPARTMENT OF PUBLIC SOCIAL SERVICES

BUREAU OF SPECIAL OPERATIONS

Number
4483

Date:
08/16/2004

ADMINISTRATIVE DIRECTIVE

SUBJECT: ELECTRONIC BENEFIT TRANSFER (EBT) - OUT OF COUNTY/STATE CLIENT LIST (OCSCL) REPORT

REFERENCE: DPSS Administrative Directive 4469, Implementing Transitional Food Stamps, 01/15/2004
General Relief Handbook, Section 42-402.23, Residence
Eligibility Assistance Standards (EAS) Handbook 42-403, Residence

CANCELS: None

FILE IN:

SPECIAL ATTENTION:

☒ General Relief
☒ Welfare Fraud
☒ CalWORKs
☐ Food Stamps

Report Required: ☐ Yes ☒ No
Survey required: ☐ Yes ☒ No

I. PURPOSE/BACKGROUND:

This directive provides guidelines for evaluating eligibility for CalWORKs, General Relief (GR) and/or Food Stamp (FS) benefits for participants identified by the Statewide Automated Reporting System (SARS) as using their EBT card outside of Los Angeles County or in another state for three (3) consecutive months.

With the implementation of Electronic Benefit Transfer (EBT), the Welfare Fraud Prevention and Investigations (WFP&I) Section received access to SARS. Each month, WFP&I staff review the SARS, Out of County/State Client List (OCSCL) report. The OCSCL report identifies participants who have used their EBT card to access their benefits **exclusively** in another county or state for three (3) consecutive months.

WFP&I will review the report and initiate an investigation, when appropriate. If after review the Early Fraud Investigator (EFI) determines that the individual is residing out of Los Angeles County or the state and has not reported the move to their Eligibility Worker (EW), the EFI will recommend that the EW take appropriate action.

II. POLICY:

GR and Non-Assistance Food Stamp (NAFS) recipients who are determined to be residents of another **county or state** are not eligible to receive these benefits from Los Angeles County.

II. **POLICY: (Continued)**

CalWORKs and/or CalWORKs/FS participants who are determined to be residents of another **state** are not eligible to receive these benefits from Los Angeles County.

Eligibility staff shall re-determine eligibility for CalWORKs and/or CalWORKs/FS participants determined to be living in another **county** and initiate an Inter-County transfer when appropriate, per existing procedures. In addition, Eligibility staff shall evaluate CalWORKs/FS cases for eligibility for Transitional Food Stamp (TFS) benefits for persons no longer eligible for CalWORKs benefits.

III. **PROCEDURES:**

A. **Welfare Fraud Prevention & Investigation (WFP&I) Responsibilities:**

1. **WFP&I Deputy - Automation Unit**

- a. Receive and review monthly SARS OCSCCL report.
- b. Forward report to designated staff for clearing.
- c. Forward annotated SARS OCSCCL report showing cases with cash and/or Food Stamp benefits accessed on EBT in another state or county non-contiguous to Los Angeles County to WFP&I's Intake Unit.
- d. Receive monthly report on SARS OCSCCL activities from Early Fraud Detection/Prevention (EFD/P) program Deputy or Coordinator.
- e. Compile statistical reports on SARS OCSCCL report as requested.

2. **WFP&I Intake Unit**

- a. Receive monthly SARS OCSCCL report for cases showing EBT card used exclusively in another state or county, non-contiguous to Los Angeles County, for 3 months or more.
- b. Clear case on LEADER per existing procedures.
- c. Initiate fraud referral on LEADER as follows:
 1. Assign fraud referral to EFD/P unit in the case carrying district on an **open** case per existing procedures for assigning an investigation to the EFD/P Unit.
 2. Assign fraud referral to designated WFI in Welfare Fraud Linkage Analysis Database System (WFLADS) unit per existing procedures for **closed** cases **if the EBT card was used in another state.**

III. PROCEDURES: (Continued)

A. Welfare Fraud Prevention & Investigations (WFP&I) Responsibilities: (Continued)

3. Early Fraud Investigator (EFI)

- a. Receive OCSCCL report, including SARS printout from WFP&I Headquarters.
- b. Review the report, including transaction dates, for cases showing EBT usage in other states and counties non-contiguous to Los Angeles County.
- c. Review **LEADER, Data Collection, Case Comments** screen to determine if the participant reported a move or a need to be temporarily out of the County/state.
- d. Review the **Issuance Summary** screen in the **LEADER, Benefit Issuance**, subsystem for NAFS cases to determine if the Food Stamp issuance is for Transitional Food Stamps (TFS), as indicated by a Payment Type of "Transitional FS."
- e. Contact the public assistance agency in the state or county where the participant used EBT to access his/her cash and/or Food Stamp benefits to determine if the participant has applied for or is receiving benefits in that state or county.
- f. Conduct an investigation for an allegation of whereabouts unknown per existing procedures.
 1. For homeless GR cases, the EFI shall determine if the participant has picked up mail (i.e. QR 7s &, NOAs) from the District Office as required.
- g. Identify participants residing out of the County or state.
- h. Notify the EW of the findings via the **Future Action Control (FAC)** system as follows:
 1. Initiate **FAC** informing EW to view comments on the **Data Collection, Case Comments** screen and the date of the comments.
 2. Input details of investigation on **Case Comments** screen.
 3. Advise EW to take appropriate action for CalWORKs, CalWORKs/FS and NAFS cases.
 4. Advise EW to **terminate** the case as "Out of County" for **GR cases only**.

III. PROCEDURES: (Continued)

A. **Welfare Fraud Prevention & Investigations (WFP&I) Responsibilities: (Continued)**

3. **Early Fraud Investigator (EFI) (Continued)**

- i. Print a copy of the **FAC** and the **Case Comments** screen.
 1. Complete the EFD/P 2, Early Fraud Detection/Prevention Investigative Findings Report, (Attachment I).
 2. Make three copies of the EFD/P 2, the **FAC** and the **Case Comments** screen.
 3. Attach a copy of **FAC** and **Case Comments** screen to EFD/P 2.
 4. Forward the original EFD/P 2 and attachments to the EW, forward the first copy to the Eligibility Supervisor (ES) and forward the second copy to the District Fraud Liaison/or appropriate Deputy. File the third copy in the Central Fraud Folder (CFF).
- j. Initiate a referral to WFP&I Headquarters for investigation of historical fraud per existing procedures for **all** GR cases and for other aid programs, if appropriate.

4. **Supervising Welfare Fraud Investigator (SWFI) - Early Fraud Unit**

- a. Complete WFP&I xxx, EBT OCSCCL Monthly Report, (Attachment II) and forwards to WFP&I Deputy along with monthly production report.
- b. Compile a list of the cases that require EW action and forwards to EFD/P Deputy or Coordinator.

5. **WFP&I Deputy and/or Early Fraud Coordinator:**

- a. Receive delinquent list of cases requiring EW action and forwards to Deputy/District Fraud Liaison for follow-up.
- b. Receive and reviews monthly EBT OCSCCL (Attachment II) report from EFD/P SWFI.
- c. Forward Monthly OCSCCL report (Attachment II) to Staff Assistant.

B. **Eligibility Worker (EW) Responsibilities:**

1. **EW - General Relief Case:**

- a. Receive EFD/P2 and printout of **FAC** and **Case Comments** screen from EFI.

III. PROCEDURES: (Continued)

B. Eligibility Worker (EW) Responsibilities: (Continued)

1. EW - General Relief Case: (Continued)

- b. Go to the **Individual Attributes Summary** screen in the **LEADER, Data Collection** subsystem and highlight the individual no longer residing in LA County.
- c. Click the Detail button to open the Residency tab on the **Individual Attributes** screen.
- d. Enter a Valid From date to reflect the first date the individual was no longer residing in LA County.
- e. Enter a Report Date to indicate when the County discovered this information.
- f. Change LA Resident from "Y" to "N."
- g. Change Intent to Reside from "Y" to "N."
- h. Select a Change Reason of "Pt Failed to Report Timely." This will compute prior months and establish a claim if an overpayment occurred.
- i. Group this change separately from other changes on the **Change Identification** screen.
- j. Run **SFU/EDBC** and authorizes the program to implement the eligibility change and generate a Notice of Action (NOA).
- k. Update **Case Comments**.

2. EW - CalWORKs, CalWORKs/FS or NA Food Stamp Cases:

- a. Receive EFD/P 2 along with printout of the **FAC** and **Case Comments** screen from EFI.
- b. Review case to determine if the participant has reported a move to another state or County.
- c. Take appropriate action for the case where participant's whereabouts are unknown or the participant has moved to another state.
- d. If the EFI indicates that the participant has moved to another County within California, the EW shall evaluate a CalWORKs/CalWORKs/FS case for Inter-County transfer and/or Transitional Food Stamp benefits per existing procedures.
- e. Update **Case Comments**.

III. PROCEDURES: (Continued)

C. Deputy/District Fraud Liaison Responsibilities:

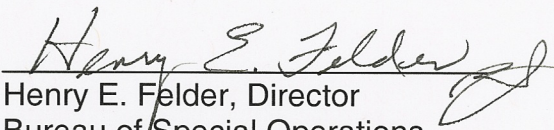
1. Deputy/District Fraud Liaison:

- a. Receive a copy of EFD/P 2, **FAC** and **Case Comments** screen from the EFD/P SWFI or EFI.
- b. Receive a list of the delinquent out of state/County cases from the WFP&I Deputy.
- c. Control and review LEADER to ensure EW takes appropriate action.

2. Eligibility Worker:

- a. Receive a copy of EFD/P 2 **FAC** and **Case Comments screen**.
- b. Take appropriate action to discontinue cash and/or Food Stamp benefits.
- c. Respond to **FAC**, per existing procedures.
- d. Complete EFD/P 2 and return to EFI.

Questions regarding this directive may be addressed to the District Fraud Liaison. District Fraud Liaisons who have questions may call the WFP&I Program Section.


Henry E. Felder, Director
Bureau of Special Operations

HEF:GJ:LE:MH:mh

Attachments

Clearance/Approval:

BSO [X] BWS [X] BPP [X] BAS [X]



DEPARTMENT OF PUBLIC SOCIAL SERVICES
WELFARE FRAUD PREVENTION & INVESTIGATIONS SECTION
EARLY FRAUD DETECTION / PREVENTION INVESTIGATIVE FINDINGS REPORT

TO: EW/ES _____ File No.: _____ District No.: _____

FROM: WFI: _____ Telephone No.: _____

Re: _____
Case Name LEADER Case Number

Attached are copies of the LEADER FAC and LEADER case comments dated _____.

Please take appropriate action.

☐ NO FRAUD DETECTED

☐ FRAUD DETECTED (See Below)

- ☐ Applicant / Participant not at reported address.
- ☐ Unreported Absent Parent residing in the home.
- ☐ Applicant requested or received aid for a person out of the home.
- ☐ Unreported Income.
- ☐ Unreported Assets / Property.
- ☐ Other: _____

TO BE COMPLETED BY ELIGIBILITY WORKER OR ELIGIBILITY SUPERVISOR

Please indicate the action taken below:

- ☐ Application Denied Effective Date of Denial: _____
- ☐ Case Terminated Effective Date of Termination: _____
- ☐ Eligibility Re-Evaluated
- ☐ Assistance Reduced

	Amount before reduction	Amount after reduction
<input type="checkbox"/> Cash (CalWORKs/GR)	_____	_____
<input type="checkbox"/> Food Stamps	_____	_____
- ☐ No Eligibility Action Required
- ☐ A copy of the Case Comments screen describing the appropriate Case Action taken is attached.

Eligibility Worker: _____ File No.: _____ Date: _____

Eligibility Supervisor: _____ Date: _____

c: District Fraud Liaison

Distribution: Original - EW
First Copy – District Fraud Liaison
Second Copy – CFF

EBT OCSCCL MONTHLY REPORT

Unit: _____ WFI File #: _____ Report Month/Year: _____

No.		CalWORKs	PA Food Stamps	NA Food Stamps	General Relief	Total
1.	EBT OCSCCL Referrals Carried Over From Previous Month (#9 from prior month)					
2.	New Referrals received in Report Month					
	A. No. of EBT Referrals on Out of County Match					
	B. No. of EBT Referrals on Out of State Match					
3.	Total EBT OCSCCL Referrals on Hand (# 1 plus # 2)					
4.	Number of Cases where Participant reported move to another County/state.					
5.	Number of Cases Participant failed to report move to another County/state					
6.	No. of District Notifications sent via WFP&I EFD/P 2					
7.	No. of EFD/P 2s returned from Districts (No. A plus B plus C)					
	A. Benefits Reduced - Inter-County Transfer					
	B. Benefits Discontinued - Residing Out of County/state.					
	C. No Action Necessary/Taken					
8.	Total Referrals Disposed (#6 minus #7)					
9.	Total OCSCCL Matches Remaining (# 3 minus #7)					
10.	Number of cases referred to WFP&I HQ for investigation of historical fraud					